

Shipper 16327

June 30, 1986

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAX000034348	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Label House 9852 Dupree, So. El Monte, CA 4. Generator's Phone (818) 444-7755				A. State Manifest Document Number 86534466		
5. Transporter 1 Company Name Omega Recovery Services				B. State Generator's ID CAX000034348		
6. US EPA ID Number CAX00042245001				C. State Transporter's ID 706737		
7. Transporter 2 Company Name				D. Transporter's Phone 213/698-0991		
8. US EPA ID Number				E. State Transporter's ID		
9. Designated Facility Name and Site Address Omega Recovery Services 12504 E. Whittier Blvd. Whittier, CA 90602				F. Transporter's Phone		
10. US EPA ID Number CAX00042245001				G. State Facility's ID CAD042245001		
				H. Facility's Phone 213/698-0991		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a. Waste ORM-A N.O.S. (Flexosolvent) NA 1693 ORM-A				0045 DM	-1159-G	211
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above PERCHLOROETHYLENE Photo Polymer Resin N-BUTYL ALCOHOL				K. Handling Codes for Wastes Listed Above Rol		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.						
Printed/Typed Name Gilbert Teller				Signature Gilbert Teller		Month Day Year 11 17 1986
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Isaac Woods Jr				Signature Isaac Woods Jr		Month Day Year 07 07 1986
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name				Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name STEVEN SIMPSON				Signature Steven Simpson		Month Day Year 07 10 1986

DHS 8022 A (11/85)
(EPA 8700-22)White: TSD/ SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento CA 95812